

## **GEORGIA DEPARTMENT OF HUMAN RESOURCES Food Service Establishment Inspection Report**

Establishment Name: Southland Health & Rehabilitation

Address: 151 Wisdom Rd

City: Peachtree City Time In: 3:30 pm Time Out: 4:30 pm

**Inspection Date:** 1/26/2011 CFSM: Ciara M Fitts

Purpose of Inspection: Routine: ● Follow-Up: O Complaint: O Last Score

Preliminary: O Other: O **Risk Type:** 1 O 2 ● 3 O

are control measures to prevent illness or injury.

'Risk Factors are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. Public Health Interventions

O 12D. Washing fruits and vegetables

**Postings and Compliance with Clean Air Act** 

13A. Posted: Permit/Inspection/Choking Poster/Handwashing

13 OUT

0

99 Permit#: 1-9204 rior Score 'Good Retail Practices are preventive measures to control the introduction of pathogens, 99

chemicals, and physical objects into foods

**CURRENT SCORE** 

0 0

00

3 points

0 0

**CURRENT GRADE** 

**SCORING AND GRADING:** A=90-100 B=80-89 C=70-79 U<69

## FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

(Mark designated compliance status (IN, OUT, NA, or NO) for each numbered item. For items marked OUT, mark COS or R for each item as applicable. Deduct points for category or subcategory.) IN = in compliance OUT = not in compliance NO = not observed NA = not applicable COS = corrected on-site during inspection R = repeat (violation of the same code provision) = 2 points per subcategory

Date

10/20/10

7/19/10

Α

Α

Grade

					· · · · · · · · · · · · · · · · · · ·		_		Site					t=repeat (violation of the same code provision)=2 points per subcat		
	Compliance Status  1   IN   OUT   NA   NO   Supervision					_	Compliance Status								cos	
1	● IN	001	NA	NO	<b>Supervision</b> 1-2. Person in charge present, demonstrates knowledge		oint	_	5	IN	OUT			Cooking and Reheating of Potentially Hazardous Foods, Consumer Advisory-Subcategory 1	9 poir	
	_	Ľ			and performs duties	Ť				•	0	0	0	5-1A. Proper cooking time and temperatures	0	
2	IN	OUT	NA	NO	Employee Health, Good Hygenic Practices, Preventing Contamination by Hands-Subcategory 1	9 p	oint	ts		0	0	0	•	5-1B. Proper reheating procedures for hot holding	0	
	•	0			2-1A. Proper use of restriction & exclusion	0	0	)						Consumer Advisory-Subcategory 2	4 poir	
	•	0		0	2-1B. Hands clean and properly washed	0	О	<b>&gt;</b>		0	0	•		5-2. Consumer advisory provided for raw and undercooked foods	0	
	•	0	0	0	2-1C. No bare hand contact with ready-to-eat foods or approved alternate method properly followed	0	0	)	6	IN	OUT	NA	NO	Holding of Potentially Hazardous Foods, Date		
		l			Employee Health, Good Hygenic Practices-Subcategory	2 <b>4 p</b>	oint	rs		•	0	0		Marking Potentially Hazardous Food-Subcategory 1 6-1A. Proper cold holding temperatures	9 poir	
	•	0			2-2A. Management awareness; policy present; reporting		Ю							6-1B. Proper hot holding temperatures		
		0		0	2-2B. Proper eating, tasting, drinking, or tobacco use	0	o	_		0	0	0	•		0	
	•	0		_	2-2C. No discharge from eyes, nose, and mouth	0	0	_		0	0	0	•	6-1C. Proper cooling time and temperature	0	
	•			U		_				0	0	•	0	6-1D. Time as a public health control: procedures and records	00	
_	•	0			2-2D. Adequate handwashing facilities supplied & accessable	Ť		_								
3	IN	OUT	NA	NO	Approved Source	_	oint	_						Date Marking-Subcategory 2	4 poin	
	•	0			3-1A. Food obtained from approved source; parasite destructio	Ť	О			•	0	0	0	6-2. Proper date marking and disposition	0	
	0	0	0	•	3-1B. Food received at proper temperature	0	О	_	7	IN	OUT	NA	NO	Highly Susceptable Populations	9 poi	
	•	0			3-1C. Food in good condition, safe, and unadulterated	0	O			•	0	0		7-1. Pasteurized foods used; profibited foods not offered	0	
4	IN		NA	NO	Protection from Contamination-Subcategory 1	9 p	oint	ts	8	IN	OUT	NA	NO	Chemicals	4 poi	
	•	0	0		4-1A. Food separated and protected	0	0	<u> </u>		•	0	0		8-2A. Food additives: approved and properly used	0	
	•	0			4-1B. Proper disposition of contaminated food; returned	0	0	)		•	0			8-2B. Toxic substances properly identified, stored, used	0	
		_			food or unused food not re-served  Protection from Contamination-Subcategory 2			<b>-</b>	9	IN		NA	NO	Conformance with Approved Brecodures		
		0	0		4-2A. Food stored covered	0	oint		9	IN	OUT	NA	NO	Conformance with Approved Procedures	4 poi	
			0		4-2B. Food-contact surfaces: cleaned & sanitized		+-	_		0	0	•		9-2. Compliance with variance, specialized process and HACCP plan	0	
GOOD RETAIL PRACTICES																
					(Mark the numbered item OUT, if not in compliance. For items marked OU								e. R=R	Repeat (violation of the same code provision) = 1 point per		
	Compliance Status							COS R Compliance Status							COS	
1	LO	OUT			Safe Food and Water, Food Identification	3 n	oint		1	L <b>4</b>	OUT			Proper Use of Utensils	1 poi	
_		0	10A	Past	reurized eggs used where required	Ō	$\overline{}$	_			0	O 14A. In-use utensils: Properly stored			0	
		0			er and ice from approved source	0	0				0	14B.	Uter	nsils, equipment and linens: properly stored, dried, handled	0	
		_				+	_	_			0	14C.	Sing	gle-use/single-service articles: properly stored, used	0	
		0	10C	. Varı	ance obtained for specialized processing methods	0	О	_			0	14D	. Glo	ves used properly	0	
		0	10D.	Food p	roperly labeled; original container; required records available; shellstock tag	s O	0	15 OUT Utensils, Equipment and		Utensils, Equipment and Vending	1 po					
1	l1	OUT			Food Temperature Control	3 p	oint	ts			15A. Food & nonfood-contact surfaces cleanable, properly designed, constru		nonfood-contact surfaces cleanable, properly designed, constructed, used	0		
		0	11A.	Prope	r cooling methods used; adequate equipment for temperature control	ol O					O 15B. Warewashing facilities: installed, maintain		rewashing facilities: installed, maintained, used; test strips	0		
		0	11B. Plant food properly cooked for hot holding			0	0	) [			0	15C.	Non	nfood-contact surfaces clean.	0	
		0	11C	. App	roved thawing methods used	0	О	)	1	1 1			Water, Plumbing and Waste	2 poi		
		0	-		rmometers provided and accurate	0	О	<u>,                                    </u>		O 16A. Hot and cold water available; adequate pressure			and cold water available; adequate pressure	0		
-	L2	OUT			Prevention of Food Contamination	2	-:				0	16B. Plumbing installed; proper backflow devices			0	
			12A	. Con	tamination prevented during food preparation, storage,		oint				vage and waste water properly disposed	0				
		0	disp		and the property of the proper	0	О	<u>'</u> ] [	1	L <b>7</b>	OUT			Physical Facilities	1 po	
		0	12B	. Pers	sonal cleanliness	0	О	) [			0	O 17A. Toilet facilities: properly constructed, supplied, cleaned				
		•	12C	. Wip	ing cloths: properly used and stored	0	0	) [			0	O 17B. Garbage/refuse properly disposed; facilities maintained				

Inspector (Signature):		Follow-up: Yes O No●	Follow-up Dat	te:		
Person in Charge (Signature):	(Print)		Da	te: 1/26/2011 3:30:	19 00:	М
O 13B. Compliance with Georgia Smoke Free Air Act		o loi insecto, rodento, and	ranimais not prese		1~1	Ĭ
		10. Insects, rodents, and				

0

3 points

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0

0 0 0

0

18 OUT

17C. Physical facilities installed, maintained, and clean

O 18. Insects, rodents, and animals not present

17D. Adequate ventilation and lighting; designated areas used

**Pest and Animal Control** 

## **Food Service Establishment Inspection Report Addendum**

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Violations cited in this report n Regulations Food Service Chap	nust be corrected within ter 290-5-14, Rule .10 s	the time frames specified below, or a subsection (2)(i) and (j)	as sta	ted in the Georgia L	Department of H	luman Res	ources Ru	ıles and
<b>Establishment</b> Southland Health & Rehabilitation			<b>Per</b> 1-92			<b>Date</b> Inspection	Date2	
Address 151 Wisdom Rd		City/State Peachtree City, GA 30269			<b>Zip Code</b> 30269		e	
		TEMPERATURE OBSERV	/AT					
Item/Location	Temp	Item/Location		Temp	Item/	/Location		Temp
fruit cups/fruit parfaits(upright cool	er) 43/44	prepped salads/milk(WIC)		41/40	milk/lactaid(icve	bath		31/29/30
applesauce/pasteurized eggs(uprigl		prepped fruit cups(WIC)		43				
gallon milk/sliced shredded cheese(cooler)	(upright 42/43-44	dressings(WIC)		37-40				
broccoli(cooking on stove)	129	ice cream cups(walk in freezer)		4/5				
liquid egg(thawing in upright cooler	32	ham/lasagna(WIF)		3/4				
tilapia filets(being prepped on coun		ground beef/veggies(WIF)		1/4				
sliced cheese/ham(walk in cooler)	41/38	frozen egg product(WIF)		5				
mushrooms/turkey(WIC)  Item	40/39	beef loin(WIF)		1				
Number		OBSERVATIONS AND COR	RREC	CTIVE ACTION	IS			
S15 15A Repair hing material for us	ged lid on scoop o	container at bulk sugar so t	hat	tape is not re	quired. Tape	e is not	an app	proved
Person in Charge (Signature)  Inspector (Signature)					Dat Dat	<b>te</b> 1/26/201	11 3・30・00	PM

## **Food Service Establishment Inspection Report Addendum**

Page 3 of 3

Violations cited in this report must be corrected within the time frames specified below, or as stated in the Georgia Department of Human Resources Rules and									
Regulations Food Service Chapter 290-5-14, Rule .10 subsection (2)(i) and (j).  Establishment Permit Date									
Southland H	Health & Rehabilitation		1-92	204	InspectionI				
151 Wisdon	n Rd			City/State Peachtree City, GA 30269		Zip Code 30269			
Item Number		OBSERVATIONS AND C	ORREC	CTIVE ACTIONS					
Person in	Charge (Signature)				Date				
Inspector (Signature)  Date 1/26/2011 3:30:00 PM									